

CLAIMS ONLY							Application Number 101659592	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51	
2		/					52	
3		/					53	
4		/					54	
5							55	
6		/					56	
7	/						57	
8		/					58	
9		/					59	
10		/					60	
11	/						61	
12		/					62	
13		/					63	
14							64	
15							65	
16							66	
17							67	
18							68	
19							69	
20	/						70	
21							71	
22							72	
23							73	
24							74	
25							75	
26							76	
27							77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
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37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	3						Total Indep	
Total Depend	10						Total Depend	
Total Claims	18						Total Claims	